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DEPARTMENT OF LABOR AND INDUSTRIES
PUBLIC HEARING
ERGONOMICS

DATE: January 12, 2000
TIME: 6:00 P.M.
PLACE: Cavanaugh's Inn at the Park
Skyline Room
303 West North River Drive
Spokane, Washington
HEARING OFFICERS: Tracy Spencer
Michael Wood

1 MR. SPENCER: Good evening ladies and gentlemen. I
2 now call this hearing to order. This is a public hearing
3 being sponsored by the Department of Labor and Industries. I
4 am Tracy Spencer, the Standards Manager, and this is Michael
5 Wood, Senior Program Manager in WISHA Services, and we are
6 representing Gary Moore, the Director of the Department of
7 Labor and Industries, as the hearings officers.

8 For the record, this hearing is being held on
9 January 12th in Spokane, Washington, beginning at 6:45 p.m.
10 as authorized by the Washington Industrial Safety and Health
11 Act, and the Administrative Procedures Act.

12 For those of you who have written comments that you
13 would like to submit, please give them to Josh Swanson or
14 Jennie Hayes at the side table. We will accept written
15 comments until 5:00 p.m. on February 14th, 2000, for those
16 unable to submit comments today. Comments may be mailed to
17 the Department of Labor and Industries, WISHA Services
18 Division at Post Office Box 44620, Olympia, Washington,
19 98504-4620; e-mailed to ergorule@lni.wa.gov or faxed to
20 (360)902-5529. Comments submitted by fax must be ten pages
21 or less.

22 The addresses and phone numbers that I just gave
23 you are in the handouts that are provided at the table.

24 The court reporter for this hearing is Paul
25 Sublette of Sublette Reporting. Transcripts of the

1 proceedings should be requested and are available from the
2 court reporter. Also copies of the transcripts will be
3 available on the WISHA home page within three weeks.

4 Notice of this hearing was published in the
5 Washington State Register on December 1st, 1999 and
6 December 15th, 1999. Hearing notices were also sent to
7 interested parties. In accordance with the RCW notice was
8 also published 30 or more days prior to this hearing in the
9 following newspapers: The Journal of Commerce, the
10 Spokesman-Review, the Olympian, the Bellingham Herald, the
11 Columbian, the Yakima Herald-Republic, and the Tacoma News
12 Tribune.

13 This hearing is being held to receive oral and
14 written testimony on the proposed rules. Any comments
15 received today, as well as written comments will be presented
16 to the Director.

17 Prior to starting the formal hearing an oral
18 summary of the proposed rules was given and a question-and-
19 answer period occurred. Please refer to the handout provided
20 to you at the door for a copy of the proposed rule.

21 In order to evaluate the potential economic impact
22 of the proposed rule on small business, the department
23 completed a Small Business Economic Impact Statement in
24 accordance with the Regulatory Fairness Act.

25 Please remember this is not an adversarial hearing.

1 There will be no cross-examination of the speakers, however
2 the hearings officers may ask clarifying questions.

3 In fairness to all parties I ask your cooperation
4 by not applauding or verbally expressing your reaction to the
5 testimony being presented. If we observe these rules
6 everyone will have the opportunity to present their testimony
7 and help the Director to consider all viewpoints in making a
8 final decision.

9 At this point we will take oral testimony. Please
10 identify yourself, spell your name, and identify who you
11 represent for the record.

12 Sue Dewey.

13 MS. DEWEY: My name is Susan Dewey. It's S-u-s-a-n
14 D-e-w-e-y, and I'm a meat wrapper. I've been wrapping meat
15 for 26 years. I have carpal tunnel in both wrists, surgery
16 on the left. I feel real strongly that it is definitely job
17 related because I have no continuous outside activities or
18 hobbies or anything that I've done at any length of time.
19 And I think there are probably lots of things now that could
20 prevent some of those problems.

21 One being that the keyboards that we have in our
22 work are up high. And if they were down level, I think that
23 would help a lot for people with the movement of the fingers.
24 And if they had the wedge like a lot of the keyboards have
25 nowadays.

1 There's constant repetition in meat wrapping. Not
2 just the wrapping itself, but in the packaging as you're
3 moving one package from one place to the other you're using
4 the same hand, and it's a constant move.

5 They have new machinery now that might help, too.
6 They have the automatic wrapping stations where you're not
7 making a constant real twist, so it takes a little pressure
8 off the hands. And since I have one hand that hasn't been
9 done I know a little more now on what bothers that hand. And
10 they've given me -- they've started working out where I could
11 have two days together, and I'm finding a little time off
12 makes the hand a little better. The two days even helps
13 because it doesn't start bothering me until Friday rather
14 than Tuesday. When you're on vacations and that type of
15 thing I have no problem with it hardly at all.

16 But even in the packaging, it's not that it is
17 really so heavy, it is just the movement. The other parts of
18 the job, there's two different types of job where I work,
19 where you're doing freight or you're doing the constant
20 wrapping. And I think even a rotation of that type of work
21 maybe with the other people might help from one person doing
22 the wrapping all the time.

23 And like the equipment we have is pretty old, so
24 maybe -- I haven't worked on any of the newer equipment, so
25 possibly, you know, if somebody was watching that you could

1 see how the turning is of the wrist and how much pressure on
2 the wrist is being done.

3 That's about it that I think I have for that.

4 MR. SPENCER: Thank you.

5 Margaret Peggy Sala. I hope I got that right.

6 MS. SALA: That's great, thanks.

7 Okay, my name is Margaret, but I go by Peggy, Sala.
8 The last name is spelled S-a-l-a.

9 Good evening. I'm here tonight. I am a Registered
10 Nurse working in the operating room. I'm on the open heart
11 team and heart transplant team at Sacred Heart, but I'm here
12 today representing Washington State Nurses Association.

13 Washington State Nurses Association is both a
14 professional association and a union representing the health
15 policy, nursing practice, and work place concerns of more
16 than 11,000 RNs in the state of Washington. The majority of
17 whom work in hospitals, nursing homes, and home health
18 agencies. I am here to testify in support of the new
19 ergonomics rule proposed by the Department of Labor and
20 Industries.

21 I have been a Registered Nurse for 38 years, worked
22 in the operating room probably 34 of those years, and have
23 lifted thousands of patients and have not had a debilitating
24 back injury myself, although I've had several slight back
25 injuries, and I'm part time and haven't had to take time off

1 from work during emergency situations doing open heart
2 surgery.

3 Nationally in all industries combined 8.5 out of
4 100 workers reported nonfatal occupational injuries and
5 illnesses. However, nearly 12 out of 100 nurses in hospitals
6 reported work-related injuries. And 17.3 out of 100 nurses
7 working in nursing homes reported injuries, which is double
8 the rate for all injuries combined. The vast majority of
9 these injuries are back injuries.

10 Back injuries are mainly caused by lifting
11 unreasonable loads. 98 percent of the time nurses lift
12 patients manually. For nurses the most stressful task
13 involves the transferring of patients from a bed to a chair
14 and more so back from the chair to the bed. The National
15 Institute of Occupational Safety and Health says that a
16 51-pound stable object with handles is the maximum amount
17 anyone should routinely lift. Our patients are unpredictable
18 human beings, not stable objects with handles. Lifting the
19 patients under the armpits places excessive force on the
20 lifter's spine from 1.5 to 2 times the maximum acceptable
21 load for human lifting.

22 Registered Nurses and other nursing personnel,
23 especially those working in State hospital facilities,
24 nursing homes, and home health settings where assistive
25 lifting devices and support staffing are often in short

1 supply are particularly vulnerable.

2 WISHA's own statistics identify State hospital
3 facilities and nursing homes among the top 20 employment
4 settings for incidence of back injuries in Washington state.
5 As the average age of an RN population continues to grow
6 older -- it is presently 45 years old -- and the acuity age
7 and physical needs of the patients they care for increase,
8 these types of injuries are likely to become increasingly
9 more serious and difficult to treat.

10 Workers in Washington are entitled to a safe
11 working environment. While some employers are currently
12 taking steps to prevent workplace injuries, such as providing
13 lifting teams, lifting devices, and frequent training, we
14 need this rule to ensure that all employers comply and
15 address these hazards.

16 There are also other benefits in addressing these
17 hazards which is improved conduct, enhanced morale, and
18 reduced absenteeism when people are trained correctly to do
19 the jobs they need to do. WSNA believes that WISHA's
20 proposed rule is a much needed step in the right direction,
21 and is far better than the proposed national OSHA standard in
22 that it takes a preventive approach to addressing the problem
23 of work-related musculoskeletal injuries rather than levying
24 situations and fines after the fact.

25 While some employers may argue it is unnecessary

1 and costly to implement this program, I would like to argue
2 that it is more costly for the workers, the State, and the
3 citizens of Washington if we do not implement this program.
4 Nurses who care for the most ill and vulnerable among us
5 deserve the protection of this important ergonomic standard.

6 In conclusion on behalf of all Registered Nurses in
7 this state I would like to applaud the Department of Labor
8 and Industries with the proposed rule. Thank you for the
9 opportunity to speak.

10 Presently, I just wanted to state, in my work, in
11 my job where I work, three out of the 15 Registered Nurses
12 that circulate in the operating room, which is what my job is
13 as staff nurse, are off with back injuries. Actually one has
14 come back after eight months, another one has been off eight
15 months and is not back, and the third one is not able to work
16 in the operating room anymore so has had to go to a different
17 area where she is not doing direct patient care.

18 Thank you.

19 MR. SPENCER: Thank you.

20 Nathan Dikes.

21 MR. DIKES: I'm Nathan, N-a-t-h-a-n, Dikes,
22 D-i-k-e-s, and I represent Sunshine Health Facilities, a
23 long-term care facility in the Spokane Valley.

24 At a recent Spokane Valley Chamber of Commerce
25 luncheon I had the opportunity to hear the ergonomic changes

1 proposed by the Department of Labor and Industries given by
2 Mr. John Peard. We all at the meeting seemed to agree that
3 business needs to do more regarding minimizing our employees'
4 risks, risk factors to keep costs down and increase employee
5 retention, especially with this present tight job market.
6 This should be obvious to any prudent business owner.

7 The problem we all saw was that most of the
8 attendees felt that significant changes and improvements have
9 been made and are continuing to be made. Sunshine Health
10 Facilities, Incorporated, has been doing business over 50
11 years here in Spokane, 35 of those years in their present
12 location. We have enjoyed a significant decrease in our
13 worker injuries and thus a decrease in our L&I rate. This
14 has been possible with the help of James Groves our risk
15 management provider.

16 Sunshine Health Facilities's 1995 L&I rate factor
17 was 1.5372, and the 2000 rate factor is .6627. Over a
18 five-year period we have decreased our rate factor by 57
19 percent. Another fact is that the cost per employee for this
20 program being proposed according to the information provided
21 by Washington Health Care Association would be approximately
22 \$31.47 per employee.

23 We have approximately 190 employees and 62 percent
24 turnover, adding another 414 employees for a total of 304
25 employees per year. This program would thus cost our

1 business an additional \$9,500 per year to implement. This
2 appears to be an unnecessary expense, especially in light of
3 our proven track record, continued improvement, and good work
4 relationship with all parties concerned.

5 This also comes at a time when Medicaid
6 reimbursement is 10 percent below what it actually costs to
7 care for our residents, thus increases a burden on private
8 and Medicare residents. This would be an added cost, 70
9 percent which would be shouldered by Medicaid, thus
10 necessitating an increase in Medicaid reimbursement.

11 We are not an isolated case here in the long-term
12 care industry either. According to our State long-term care
13 association, Washington Health Care Association, information
14 that they've provided to us, nursing homes had a 37 percent
15 decrease in the severity rate for back claims during the 1995
16 to 1997 period, and a 35 percent decrease in musculoskeletal
17 claims for the same three years.

18 I know that our facility specifically has decreased
19 this rate by working with our risk management provider and
20 purchasing nearly \$30,000 worth of equipment to enable our
21 facility to pursue a zero lift policy, including easy lifts
22 and easy stands.

23 Other statistics I think you should be aware of is
24 that Washington employers in general have seen a 28 percent
25 reduction in musculoskeletal disorders since 1990.

1 Organizations such as ours have made and are continuing to
2 make necessary changes in order to provide a safe working
3 environment. All the manuals and programs that we now
4 provide work only if employees assume part of the
5 responsibility.

6 Our case in point is our business thought it was
7 important enough to keep our employees physically fit that we
8 opened an exercise facility at no cost to the employee. This
9 should be and is a great way for employees to get and stay
10 physically fit, but like all programs it is only successful
11 if the employee chooses to participate.

12 What makes sense to me and our facilities in
13 general is for us to continue to work with our risk
14 management providers and to continue to provide quality care
15 to our residents while protecting our employees and providing
16 them a safe place to work. The Department of Labor and
17 Industries should target those businesses that are not making
18 the necessary improvements rather than blanket the entire
19 state with a program that discounts improvements that have
20 already been made.

21 In conclusion, we feel that the Department of Labor
22 and Industries should: (1) Develop cooperative, if not
23 mandatory, programs; (2) recognize that long-term care
24 providers cannot comply with more regulation unless the State
25 is going to fund the cost; (3) recognize that employers

1 cannot afford ergonomics experts on staff; (4) what are the
2 consequences if L&I determines that an employer is out of
3 compliance? Changes take time, and it is obvious that most
4 businesses have taken the steps necessary toward improving
5 the workplace for its employees. The Department of Labor
6 and Industries time and effort would be better spent on
7 targeting those businesses that are not performing
8 adequately, and not diminish the effort of those businesses
9 that are steadily improving.

10 Thank you for the opportunity to speak.

11 MR. SPENCER: I have a quick question. It may have
12 been inattention on my part, but I'm not sure I got the time
13 frame.

14 MR. DIKES: Although I was going very fast.

15 MR. SPENCER: You talked about your facility having
16 had a dramatic turnaround in terms of --

17 MR. DIKES: The rate factors, correct.

18 MR. SPENCER: -- the experience factor compared to
19 the rest of the industry. You went from --

20 MR. DIKES: In 1995 our rate was 1.5372, and in
21 2000, we just received it, it was .6627.

22 MR. SPENCER: Okay, thank you.

23 Is there anyone else here that would like to
24 testify on the proposed rules? Come on up.

25 MR. JACOBS: My name is Marv, M-a-r-v, Jacobs,

1 J-a-c-o-b-s. I am here tonight as a Safety Steward with
2 United Steelworkers of America, Local 329, in support of an
3 ergonomic law in Washington state, based solely on my past
4 experience as Co-Chairman of the Ergonomic Committee at
5 Kaiser Aluminum Mead Works.

6 In the early '90s our plant manager supported a
7 plant-wide ergonomic program. He provided the resources and
8 support needed for our success. From the Department of Labor
9 and Industries Sharp was brought in and did extensive studies
10 with us on many of our tasks. From that experience we
11 obtained by working with Sharp, as well as other ergonomic
12 consultants, our committee gained respect within the plant
13 and was a welcome addition to the current safety and health
14 process.

15 We had some early successes. We learned a lot, and
16 it became evident that the ergonomic process was not only
17 reducing injuries but it was improving morale. In 1996 there
18 was a big shake-up with a lot of management changes
19 throughout our corporation. A new plant manager was brought
20 in to Mead. He showed little interest in the ergonomic
21 process of our plant. He saw no immediate payback. His
22 focus was on the bottom line and soon after his arrival the
23 committee died.

24 There were a few attempts to get the committee
25 going again, but our attempts failed because we lost the

1 needed support from upper management. Supervisors on the
2 floor showed little interest in the process. It was viewed
3 by them as one less thing they had to do. Their motivation
4 was lost in the new demands of upper management.

5 Today there are still ergonomic risks in our plant
6 that are identified and could be eliminated with little cost,
7 but are being ignored because today's management seems to be
8 more interested in the bottom line than maintaining and
9 improving safe work conditions. A law is good motivation to
10 remind management that human beings are a huge part of the
11 bottom line and need to be treated as such.

12 Thank you.

13 MR. SPENCER: Thank you.

14 Is there anyone else who would like to testify?
15 Come on up.

16 MR. KENNEDY: My name is Jim Kennedy, J-i-m
17 K-e-n-n-e-d-y. I am a union meat cutter and I'm here as a
18 member of UFCW, Local 1439.

19 I've been in the meat business for 30 years. I
20 started out way back when we were still doing carcass beef.
21 I currently have an open claim with L&I with shoulder and
22 neck injury and arm injury. I have two bulging disks, and I
23 have rotator cuff problems. I'm in an industry which has
24 predominantly repetitive motion and heavy lifting and awkward
25 positions, all the things that are listed in your little

15

1 handbook here, "Ergonomics Update #4."

2 There's very few of those motions that I don't do
3 in my job. I would say the biggest problem in my industry,
4 in the retail end of the meat business is the lifting, the
5 heavy lifting. Most of our beef comes in carcass beef boxes
6 on an average of 60 to 90 upwards to 100 pounds. A few of
7 them are over 100 pounds.

8 They come in palletized, approximately six to seven
9 feet high, that have to be unloaded so there's a lot of over
10 the head, over the shoulder lifting in tight spaces. My meat
11 cooler and most meat coolers that I've worked in are
12 undersized. They're overloaded. More than one department is
13 in there, so when you are unloading, off-loading, you're
14 lifting and turning at the same time.

15 And then when you stack on the shelving space
16 available you have to stack over your head because the space
17 is limited and there are other departments in the cooler,
18 such as dairy or whatever it might be, so space is very
19 limited.

20 And I feel that because I've been doing this for 30
21 years now that repetitive motion and the heavy lifting and
22 most of my work right now is above my shoulder work when I'm
23 working on the shelves or working with the freight or
24 whatever, or even when I'm working standing at my grinder
25 whenever we're doing hamburger, it's the type of grinder that

1 to put the meat into the grinder I have to lift over my
2 shoulders.

3 So everything I do is predicated to that, that
4 motion above my shoulders, other than when I'm standing at
5 the meat block and cutting meat. And then you get into the
6 repetitive motion of the cutting with your arm, the lifting
7 from the table to the block, or whatever the situation may
8 be.

9 Ergonomically what is the solution? You know, I
10 don't have a real answer for you. I suppose more allocated
11 space, more time to be able to do the job properly so pallets
12 can be moved or downloaded properly. I don't have back
13 problems. I was trained when I first got into the meat
14 business on how to lift properly. I don't have lower back
15 problems, other than being a 50-year-old and having your
16 normal aches and pains. But I was trained. I was taught
17 properly how to do it.

18 Maybe if there was something implemented that could
19 show me the best way to do that. Maybe if I had the space
20 allotted to where I didn't have to stack 10 to 15 80-pound
21 cases, you know, above my head every day, you know, on a
22 two-hour stretch, and then have to go out on the floor space
23 to work the shelving that we do, the lunch meats, the frozen
24 foods, whatever the case may be, that's above my shoulders,
25 you know, above my head. Sometimes I have to stand on my

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1 tiptoes. Of course I'm a short guy, but most shelving in
2 grocery stores are built to six, seven, sometimes eight feet
3 high, and we have to stock those shelves.

4 So I know a lot of meat cutters, have been in the
5 business a long time. There are very few meat cutters that
6 do not have some sort of neck, shoulder, rotator cuff
7 problem. It's an industry-wide problem. I think the people
8 from L&I are well aware of that because of the claims there.

9 Anyway, I just wanted to let you know my situation
10 and hopefully that something can be done to at least give the
11 people the training or the know-how so that they can avoid
12 these types of injuries. Because I want to be able to enjoy
13 my retirement and be able to do the things that I like to do.

14 And hopefully that these rules can help the employers so
15 that we can have some training and some insight as to what
16 things we can change and what we need to do so that there
17 won't be quite as many injuries in the meat industry.

18 Thank you.

19 MR. SPENCER: Thank you.

20 MR. STANLEY: My name is Ron Stanley. My company
21 is Empire Bolt and Screw. Although I did not originally
22 intend to speak because I feel like I'm ramping up on this
23 big time. Just in the last two days I'm starting to
24 understand what is involved in this new regulation.

25 I do have some concerns. As I heard the lead-in

1 today it appeared that it's -- hearing him it seems as though
2 it's a very straightforward, good thing for business across
3 the board to be doing. As I go through much of the detail it
4 gets much more involved than the lightness of the initial
5 presentation that I heard. And I realize that though there
6 are many industries that really need help with regard to
7 this, and you're hearing some of that testimony today, at the
8 same time it doesn't appear from perspective that it's
9 widespread throughout all businesses and needs it in a great
10 way.

11 One of the concerns that I have is when I heard the
12 comment of feasible and reasonable I always wonder whose
13 definition of feasible and reasonable is that. I have my own
14 definition of that, and you may have your definition of that,
15 but who actually decides what is feasible and reasonable?

16 The other thing that I have seen is that the
17 training costs are very low on this. For the implementation
18 of this it's very low, and from a training standpoint, there
19 isn't anything from a training standpoint that is as low as
20 what it appears when you calculate what the costs are of -- I
21 think I've seen a \$77 million figure for the State workers,
22 and if you divide that up by the number of people that will
23 be affected it's very low per person, in the range of a
24 couple of dollars per employee, and I don't quite understand
25 how the training costs could be estimated that low.

1 Much of your testimony to this point that I've
2 heard -- and I came and was only able to hear some of the
3 testimony at the 1:00 meeting that was earlier today -- most
4 of the speakers have been union workers who generally
5 represent businesses where the companies do not listen very
6 well to the employees. And fortunately there are many
7 businesses out there that do listen to employees quite a bit
8 and will work with them to try to come up with solutions.

9 I don't know what percentage that you otherwise are
10 hearing from, from workers that are nonemployees but -- or
11 nonunion, but so far I haven't heard any employees speak that
12 are nonunion. And it seems to me that that's a huge mass of
13 the employees of this state. I don't know how you reach
14 those people otherwise, but so far to this moment it appears
15 to be more of an organized approach to the responses that
16 I've heard so far.

17 I have concerns with regard to manufacturers in
18 this area like Telect, a large manufacturer, that I know that
19 they need to maintain competitiveness in a world market.
20 They're selling a product that is worldwide, and they have
21 competitors that are worldwide. And as we continue to do
22 more and more that if it's not really needed and we're making
23 businesses do things that it has not been proven that it's
24 needed for that type of business, what happens with regard to
25 the costs of producing their product and how they survive in

1 a global market.

2 I don't know if it has been considered to try this
3 program in a test mode with regard to certain kinds of
4 businesses. Businesses that are unionized, since many times
5 those companies have unionized because those companies are
6 not hearing the voice of the employees. Doing it with
7 smaller business that may not fall into the primary areas of
8 having hazard zones, but have what is defined as caution work
9 zones. Doing that kind of a pilot program seems to me to be
10 worthwhile, and I haven't heard anything of that nature to
11 test it to determine what will work before we try to do
12 something and then maybe try to fix it afterwards.

13 That's the extent of my comments. Thank you.

14 MR. SPENCER: Thank you.

15 Is there anyone else out there who would like to
16 testify? Come on up.

17 MS. LUCAS: My name is Pam Lucas, and I'm a
18 Registered Nurse. I just wanted to say that I'm very glad
19 there are ergonomic standards coming. And I believe that
20 it's extremely important that any type of ergonomic help that
21 we can get we need.

22 I'm a Registered Nurse working at Eastern State
23 Hospital. We have a large number of injured employees, and
24 in my opinion many of them are musculoskeletal injuries from
25 lifting, primarily from lifting patients. We also have

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1 injuries from lifting materials. And in the last few years I
2 have been interested in an overhead lift system where there
3 would be no lifting. And to install an overhead lift system
4 that runs on a rail and remote control -- it's a wonderful
5 system -- we need to put some money in ahead of the injuries.
6 And that's the problem, what we do is we throw our money at
7 the problem after the employee is injured.

8 And I come to you with two herniated disks and two
9 bulging disks, and almost lost my job because of it. And
10 what I would like to see is that we put our money into an
11 overhead lift system before the employees are injured. And I
12 have all kinds of information and I'll be glad to share it
13 with anyone that's glad to hear it, but we could save -- in
14 the long run we would save the money that we're spending if
15 we would just stop, use that as an ergonomic intervention,
16 and let people do their jobs without having to do them in
17 pain and worry that they're going to be losing their homes in
18 the long run.

19 And I'd also like to respond to the comment of
20 union versus nonunion. There are many nursing homes out in
21 the community that are nonunion, and nursing home employees
22 are way up there in the injury rate and they are nonunion.
23 So I just want to say that I'm very happy that the standards
24 are coming, and I'm for them.

25 Thank you.

1 MR. SPENCER: Thank you.

2 Okay, is there anyone else? Come on up and state
3 your name.

4 MS. WILHITE: My name is Diana Wilhite, D-i-a-n-a,
5 Wilhite, W-i-l-h-i-t-e, and I'm a small business owner.

6 I have to confess that I'm not as conversant on the
7 ergonomic rules that have been proposed. However, in
8 listening to some of the testimony that I have heard it
9 sounds like there are some needs for some types of rules.
10 However, it looks like it benefits certain types of jobs, and
11 also perhaps businesses that are so large that they have -- a
12 person has a very specific job description.

13 In the world of small businesses, and I'm talking
14 about businesses with ten or less employees, the job market
15 is so tight and good employees are valuable to us, and it's
16 expensive to retrain. And in talking with some of my
17 colleagues about these types of injuries that they have, I
18 have not been able to ascertain that that has been a problem.

19 I belong to an organization called the National
20 Association of Women Business Owners, and we are small
21 business owners. And in talking with them about the types of
22 jobs they have and the problems they've had, I haven't found
23 this to be a concern. So my concern is every time the State
24 of Washington proposes new rules for small businesses it ends
25 up being very costly for us. And I think perhaps maybe you

1 need to look at the claims that you have and focus in on the
2 occupations and the businesses that seem to have these types
3 of problems, because the smaller a business I don't think you
4 will find the amount of injuries that you find maybe perhaps
5 in some of the larger businesses.

6 So I ask you to take into consideration the small
7 business owner with regard to these types of jobs. I'm
8 thinking about my employees and the types of jobs they do. I
9 do the same jobs they do, because when they're absent and the
10 job needs to get done, I have to do it. And I don't like
11 changing employees because it's very costly for me, so if I
12 do a job and I find that I'm having a problem with it, then I
13 ask my employee, "Are you having a problem doing this? Is
14 this uncomfortable? Is your chair height too low or too
15 high?"

16 A small businessperson values their employees too
17 much to lose them after they've put all that time and trouble
18 in getting them hired and trained for their jobs, and I think
19 they're very cognizant of making sure that it's a safe
20 environment for their employees. So please consider the
21 small business when you do this.

22 MR. WOOD: Just to give me some additional context,
23 what type of business are you in?

24 MS. WILHITE: I own a company -- we basically are
25 sales, but we do lift, carry boxes, and we do a lot of

1 computer work so we are at the computer. We do a lot of
2 computer input, so there's the repetitive type injury, I
3 suppose, from the computer.

4 MR. WOOD: Thank you.

5 MS. WILHITE: You're welcome.

6 MR. SPENCER: Ted Hall.

7 MR. HALL: I'd like to thank the Department for the
8 opportunity to speak to you today. Unfortunately I'm not
9 prepared for this opportunity. I just learned of this
10 through the paper today, and so I may have my thoughts a
11 little bit disorganized.

12 This dates back to a situation for me that is very
13 personal because it results in what may very well be a
14 long-term permanent disability. And this started in December
15 of '94, so it's about six years ago now. And by the time I
16 was finally finished dragged it out to whatever inevitable
17 conclusion might have been reached it was at least two years
18 later. A great deal of suffering, not only physically but
19 emotionally and on every other level. This involves work in
20 the food service industry. I've been involved in various
21 aspects of this industry for much of my life, although I've
22 certainly been involved in a number of other things.

23 My job at the time was that of a banquet waiter in
24 much the same circumstances we find ourself tonight, although
25 the area that I served was much larger than this, probably

1 four to five times, maybe six times larger, and also had
2 regular seating in terms of being a cafeteria during the
3 daytime that was converted to a catering area in the evening.
4 So there was all kinds of solid oak furniture and chairs to
5 be moved. Obviously it involved carrying trays on one's
6 shoulder, which is not as easy as it looks. That's obviously
7 a rather unnatural position for one's wrist to be in, as well
8 as bearing weight on shoulders and things like that.

9 And I will try not to go into all these extraneous
10 details, but through the process of a very busy December,
11 having a lot of Christmas parties and things like that, I was
12 on my feet far more than usual, walking on some carpeting
13 like we see here, but mostly on hardwood floors and tiled
14 floors and things of that nature, which in and of itself is
15 very repetitive in nature, and I think that things like this
16 that are so common in everyday life are often overlooked in
17 terms of ergonomics. But this injury, to my way of
18 understanding, not only involved the lifting, but also this
19 constant pounding, being on my feet, as I say, far more than
20 I was used to, and resulted first in tendinitis sort of in
21 the calf and legs. Extreme soreness at the time, but it was
22 not something that I thought was sufficiently out of the
23 ordinary that had really caused me a great deal of concern at
24 the time. And had I known how the procedure works in
25 hindsight now I would have done things totally differently,

1 but I was content to sort of give this a wait and see sort of
2 thing. I was not interested in jeopardizing my job, and so I
3 basically tried to live with this for a long period of time
4 hoping that it would get better. And while the extreme pain
5 went away within a matter of a few days, I noticed that I
6 never did recover the strength in my legs. And to this day I
7 still have problems in my lower back that extend all the way
8 down into my feet, and also I have problems up into my neck.
9 There may have been preexisting conditions involved in all of
10 this.

11 I had a very difficult time finding doctors who
12 were able to corroborate and find an actual explanation. I
13 heard a lot of things like back and neck strain, and just
14 very generalized type of things. So to this day having spent
15 most of the \$1500 that I was able to settle for I still have
16 this injury. I have not had any treatment other than that
17 which I am able to give myself because I would basically end
18 up writing somebody a blank check, probably to a chiropractor
19 or whoever else might be appropriate to just have an ongoing
20 kind of relationship and try to do the best we can, and I'm
21 not in a position to do that.

22 So again I appreciate the opportunity to speak to
23 you today, and I will try to organize my thoughts a little
24 bit better and respond in e-mail or mail form to this because
25 I believe it's very important. It's obviously a little bit

1 too late for me. Because my company was self-insured, my
2 feeling looking back on it is that they basically had carte
3 blanch to do pretty much whatever they wanted to and sidestep
4 many of the rules that are set up to protect the workers.
5 Unfortunately I had no union representation being in this
6 type of a field. I had no one who was willing to help me
7 with this. I got very little help and support from Labor and
8 Industries, and I do have some bitterness about that. I hope
9 you'll excuse me if I come across as being somewhat bitter,
10 but this is a long process for me, ongoing, and I still have
11 difficulty with it.

12 Thank you very much for your time.

13 MR. SPENCER: Thank you.

14 Sir, did you want to testify? Come on up.

15 MR. FOX: Yes, my name is Dennis Fox, F-o-x. I am
16 an employee of Empire Bolt and Screw. I have been working
17 there for ten years. I am a small business employee. I do
18 have concerns about how unions take care of their work
19 forces. I on the other hand feel that my concerns for
20 stress, repetitive motion, and lifting injuries, et cetera,
21 are being taken care of by my employer.

22 We're able as a small business to be able to
23 converse directly with my employer to eliminate those injury
24 potentials, and are able to do so at a minimal amount of cost
25 and involvement by the government, or no involvement by the

1 government.

2 In my ten years there I haven't seen or heard of or
3 had any injuries of my own, nor in the 25 years of employee
4 exposure, as we discussed just prior to this meeting, nobody
5 there was able to address any of those injuries as well that
6 cost the government or the insurance companies any costs at
7 all.

8 I would ask you not to roll small business and
9 unions into the same package. The small businesses do
10 communicate very well with their employees. They have to
11 because of the poor effect that it has on businesses with the
12 layoff of personnel and the training to bring other people up
13 to speed. The unions it appears on the other hand have other
14 people who can move right into that nest, that slot. As
15 those injuries occur they lose people. It may have an impact
16 on the people themselves, but not so much on the businesses
17 as a whole.

18 I would like to see less government dealing with
19 small business because we are being well taken care of.
20 There are some exceptions to the rule. As those occurrences
21 begin to manifest themselves then I say address those issues.

22 But when they don't occur, and where in 25 years injuries
23 haven't occurred because we're being taken care of, I say let
24 it be left alone.

25 Thank you very much.

1 MR. WOOD: Again, basically for the sake of
2 context, what's your position with the company?

3 MR. FOX: I am in sales and also work the
4 warehouse. We are an industrial wholesale threaded fastener
5 house. So lifting does occur. We do lift up to 70 pounds,
6 and on occasion even more than that, but we do take all the
7 safety precautions. The people there are well trained.
8 Staff may not get that training the very first day they walk
9 in, but they do get it periodically and as needed, and safety
10 is one of the very first issues we talk about and that is
11 foremost in our minds, in our small business anyway.

12 MR. WOOD: Okay, thank you.

13 MR. SPENCER: Is there anyone else out there that
14 would like to testify on the proposal?

15 MR. POWELL: Yeah, my name is Tom Powell, and I'm a
16 member of Local 338, Steelworkers. We're on a lockout with
17 Kaiser Aluminum.

18 In the 23 years I was at Kaiser I saw programs come
19 and go on safety. Like the other man talked, we had
20 ergonomics at Trentwood, that about '96 when they started
21 cutting money they just went bye-bye. If they can make a
22 buck out of it they'd go buy a cheap piece of equipment, fix
23 it, and then a year later be right back where you started
24 from because the equipment didn't last.

25 An example is there's an extensive amount of

1 turning metal, and your body isn't made to stand there and
2 your back go one way all the time. And over the years
3 there's been hundreds of people with back injuries out there.
4 And Kaiser's answer to it is: Well, we'll just move you
5 somewhere else and move another guy in for awhile. And in
6 doing that, you know, I don't think an ergonomics program is
7 going to work unless you can get cooperation with the
8 companies. And like several people have talked. They don't
9 have a problem in the nonunion companies, but the companies
10 don't want to talk to our union people anymore. There's no
11 cooperation to speak of between the working people and the
12 big corporations.

13 That's about all I have to say. Thank you.

14 MR. SPENCER: Thank you.

15 Again, is there anybody else out there that would
16 like to testify?

17 Okay, again the deadline for sending in written
18 comments is 5:00 p.m. on February 14th, 2000. I want to
19 thank all of you who came in and thank those of you who
20 testified.

21 This meeting is adjourned at 7:30.

22 (Meeting was adjourned.)

23

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25

1 STATE OF WASHINGTON)
) ss: Certificate
2 COUNTY OF SPOKANE)
3

4 I, Paul D. Sublette, Notary Public in and for the State
5 of Washington;

6 DO HEREBY CERTIFY:

7 That the foregoing is a true and correct transcription
8 of the electronic four-channel recording of the Department of
9 Labor and Industries Public Meeting on the date and at the
10 time and place as shown on page one hereto;

11 That I am not related to any of the parties to this
12 matter and have no interest in the outcome of said matter;

13 Witness my hand and seal this 7th day of February, 2000.
14

15
16 Notary Public in and for the State
17 of Washington, residing in Valleyford
18 My commission expires: 5/5/03
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